Fill in this information to identify your case:		
United States Bankruptcy Court for the :		
NORTHERN District ofILLINOIS(State)		
Case Number (If known):	Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13	☐ Check if this is an amended filing

## Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your f	ull name		
		ne name that is on your ment-issued picture	Vivian First name	First name
	your dr	cation (for example, iver's license or	Sharone Middle name	Middle name
	passpo Bring v	rt). our picture	Armstrong	middle frame
	identific	cation to your meeting etrustee.	Last name	Last name
			Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.		ner names you		
	have ι years	used in the last 8	First name	First name
		your married or names.	Middle name	Middle name
			Last name	Last name
			First name	First name
			Middle name	Middle name
			Last name	Last name
3.		he last 4 digits of Social Security	xxx - xx - 4007	XXX - XX
	numbe	r or federal ual Taxpayer	OR	OR
	Identifi	cation number	9xx - xx	9xx - xx

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Document Armstrong Vivian Sharone Debtor 1 Case Number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names	Business name  Business name  EIN  EIN	I have not used any business names or EINs.  Business name  Business name  EIN
5.	Where you live	533 Hampshire Lane Number Street	If Debtor 2 lives at a different address:  Number Street
		Bolingbrook IL 60440 City State ZIP Code WILL County	City State ZIP Code  County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.
		Number Street P.O. Box	Number Street P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy.	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408

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Document Armstrong Vivian Sharone Debtor 1 Case Number (if known)

Pa	Tell the Court About Your	Bankruptcy	Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		Bankrup oter 7 oter 11 oter 12	•		equired by 11 U.S.C. § 342(b) for Incomplete Burner and check the appropriate b	
8.	How you will pay the fee	local yours subn with  I nee Appl I req By la less pay t	court for self, you a pre-pi d to particular that www. a just that the feet in the self-self-self-self-self-self-self-self-	or more details about may pay with cash our payment on you rinted address.  If the fee in installing for Individuals to Part of the official points of the official point installments). If you may pay with the official point installments.	at how you may now, cashier's checur behalf, your at the ments. If you checur y The Filing Feet (You may required to, waits overty line that a pour choose this control of the manufactured to the control of the contro	Please check with the clerk's capay. Typically, if you are paying the paying	g the fee ney is and or check  n the 103A).  Ing for Chapter 7. y if your income is ou are unable to
9.	Have you filed for bankruptcy within the last 8 years?	□ No ■ Yes.		ILNBKE ILNBKE	When When When	06/03/2015	15-19391 11-29109
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate?	■ No	District		When	Relationship to you Case Number, if known MM / DD / YYYY  Relationship to you Case Number, if known MM / DD / YYYY	own
11.	Do you rent your residence?	■ No. □ Yes.	reside	our landlord obtained ance?	ement About an E	nt against you and do you want to s	

Debtor 1 Vivian Sharone Document Armstrong Page 4 of 62

Case Number (if known)

12.	Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a	■ No. □ Yes.	Go to Part 4.  Name and location of I	business			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.		Name of business, if any	Name of business, if any			
			Number Street				
			City		State Zi	ip Code	
			Check the appropriate	box to describe your business:			
			☐ Health Care Bus	iness (as defined in 11 U.S.C. §	101(27A))		
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C.	§ 101(51B))		
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Brok	ter (as defined in 11 U.S.C. § 101	(6))		
			☐ None of the above	ve			
	debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No. I	the Bankruptcy Code.	pter 11. r 11, but I am NOT a small busine r 11 and I am a small business de	-		
Pa	rt 4: Report if You Own or Ha	ve Any Hazard	lous Property or Any Prop	perty That Needs Immediate Atten	ition		
14.	Do you own or have any property that poses or is alleged to pose a threat	No.	What is the hazard?				
	of imminent and indentifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		If immediate attention is	s needed, why is it needed?			
			Where is the property?	Number Street			
				City		ZIP Code	

Debtor 1

Vivian

Sharone

Document

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Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Vivian Sharone Document Armstrong

Debtor 1

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	i list Hallic	Wildle Name Last Name		
Pai	t 6: Answer These Questions	for Reporting Purposes		
16.	What kind of debts do you have?		consumer debts? Consumer debts are deprimarily for a personal, family, or household	= ::
			business debts? Business debts are debestment or through the operation of the busine	-
		Yes. Go to line 17.		
		16c. State the type of debts you o	owe that are not consumer debts or business	debts.
17.	Are you filing under Chapter 7?	No. I am not filing under Ch	napter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses		ter 7. Do you estimate that after any exempt es are paid that funds will be available to distr	
	are paid that funds will be available for distribution to unsecured creditors?	<u> </u>		
18.	How many creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion
Pai	Sign Below			
For	you	I have examined this petition, and correct.	I declare under penalty of perjury that the info	ormation provided is true and
		·	oter 7, I am aware that I may proceed, if eligib nderstand the relief available under each cha	• • • •
			did not pay or agree to pay someone who is d read the notice required by 11 U.S.C. § 342	
		I request relief in accordance with	the chapter of title 11, United States Code, s	pecified in this petition.
			ment, concealing property, or obtaining mone in fines up to \$250,000, or imprisonment for ud 3571.	
		/s/ Vivian Sharone Art Signature of Debtor 1		ature of Debtor 2
		Executed on04/21/2016	<u>S</u> Exec	cuted on

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Debtor 1	Vivian	Sharone	Armstrong	Case Number (if known)
	First Name	Middle Name	Last Name	

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

🗶 /s/ Jon Kurt Clasing	Date	Date: 04/26/20	16
Signature of Attorney for Debtor	Bute	MM / DD / YYYY	
Jon Kurt Clasing			
Printed name			
Geraci Law L.L.C.			
Firm name			
55 E. Monroe St., #3400			
Number Street			
Chicago	IL	60603	
City	State	ZIP Code	
Contact Phone312-332-1800	Email ad	ddressndil@gerac	cilaw.com
6301418	IL		
Bar number	State		

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Debtor 1	Vivian	Sharone	Armstrong
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of _	ILLINOIS (State)
	-		(=1215)

Check if this is an
amended filing

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Summarize Your Assets	
	<b>Your assets</b> Value of what you own
Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B	\$ 162,619
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 4,175
1c. Copy line 63, Total of all property on Schedule A/B	\$ 166,794
Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$99,261
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$8,852
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$36,870
Summarize Your Liabilities	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$5,811.17
Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J	\$3,848.00

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Document Vivian Sharone

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Case Number (if known) First Name Last Name Middle Name **EntriesDescription LiabilitiesAmount** <u>AssetsAmount</u>

Pa	Answer These Questions for Administrative and Statistical Records					
6.	Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes					
7.	What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.					
8.	. From the Statement of Your Current Monthly Income: Copy your total current monthly income Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	e from Official \$ 6,608.72				
9.	. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim				
	From Part 4 of Schedule E/F, copy the following:					
	9a. Domestic support obligations (Copy line 6a.)	\$_0.00				
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_5,000.00				
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00				
	9d. Student loans. (Copy line 6f.)	\$0.00				
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00				
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$ <u>0.00</u>				
	9g. <b>Total</b> . Add lines 9a through 9f.	\$_5,000.00				

F.W	Caso 16			Entered 04/28/16 17:12:39 Desc Main
FIII IN THIS IN	formation to ident	ify your case and this filing	<b>]:</b>	0 of 62
Debtor 1	Vivian	Sharone	Armstrong	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District	of <u>ILLINOIS</u>	
Case Number			(State)	Check if this is an
(If known)				amended filing
Official F	orm 106A/	<u>B</u>		
Schedul	e A/B: Pro	perty		12/15
category where responsible for pages, write you	you think it fits be supplying correct ur name and case	est. Be as complete and ac i information. If more space number (if known). Answe	curate as possible. If two mai e is needed, attach a separate	its in more than one category, list the asset in the rried people are filing together, both are equally sheet to this form. On the top of any additional and an interest in
01. Do you ow	n or have any leg	al or equitable interest in a	ny residence, building, land,	or similar property?
No.	Describe			
163.	Describe		What is the property? Check	all that apply.  Do not deduct secured claims or exemptions. Put
533 Hamp	oshire Lane		Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property
Street addre	ess, if available, or oth	ner description	Duplex or multi-unit building	
			Condominium or cooperativ	entire property? portion you own?
Bolingbro	ok	IL 60440	Manufactured or mobile hor  Land	
City	UK	State ZIP Code	Investment property	\$162,619.00
·			Timeshare	Describe the nature of your ownership
County			Other	interest (such as fee simple, tenancy by
			Who has an interest in the p	roperty? Check one. the entireties, or a life estat), if known.
			Debtor 1 only	
			Debtor 2 only	П
			Debtor 1 and Debtor 2 only	Check if this is a community property (see instructions)
			At least one of the debtors a	and another
			Other information you wish property identification numb	to add about this item, such as local per:
	-	-	ur entries fro Part 1, including	any entries for pages
Part 2:	Describe Your Vehi	cles		
Do you own le	ase or have legal	l or equitable interest in an	y vehicles whether they are	registered or not? Include any vehicles
-			=	cutory Contracts and Unexpired Leases.
03. Cars, vans	, trucks, tractors,	sport utility vehicles, moto	orcycles	
No.	5 "			
Yes.  O4. Watercraft	Describe , aircraft, motor he	omes, ATVs and other recr	eational vehicles, other vehic	les, and accessories
	•	•	essels, snowmobiles, motorcycle ad	·
Yes.	Describe	urtion you own for all of you	ır entries fro Part 2, including	any entries for names
J. Aud the uti	iai vaido di tile pu	you omillion all of you	J ait 2, moiduing	any onano ioi pages

Record # 708092 Page 1 of 6 Official Form 106A/B Schedule A/B: Property

you have attached for Part 2. Write that number here .....-----

\$ 0.00

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Document Page 11 of 2 mber (if known)

Page 11 of 2 mber (if known) Desc Main Doc 1 Vivian Debtor 1 First Name Part 3: **Describe Your Personal and Household Items** 

Do	you own or	have any legal	or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions	s
06.	Household	goods and furr	nishings		
		Major appliances,	rurniture, linens, china, kitchenware		
	No.				
	Yes.	Describe	Furniture, linens, small appliances, table & chairs, bedroom set \$2,500	\$	.00
07.	Electronics	<b>5</b>			_
			dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games		
	Yes.	Describe	Flat screen TV, computer, printer, music collection, cell phone \$750	\$750	. <u>0</u> 0
08.	Collectible	s of value			
			nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles		
	Yes.	Describe		s. 0	.00
09.	Equipment	for sports and	hobbies	Ψ	_
			nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes nusical instruments		
	Yes.	Describe	Bicycle \$100	\$ 100	0.00
10.	Firearms Examples: I	Pistols, rifles, shot	guns, ammunition, and related equipment		
	Yes.	Describe		\$0	.00
11.	Clothes Examples: I	Everyday clothes,	furs, leather coats, designer wear, shoes, accessories		_
	Yes.	Describe	Everyday clothes \$200	\$ 200	. 00
12.	Jewelry Examples: I gold, silver No.	Everyday jewelry, (	costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	\$	<u>.0</u> 0
	Yes.	Describe	Everyday jewelry, costume jewelry \$300	\$ 300	.00
13.	Non-farm a Examples: I	i <b>nimals</b> Dogs, cats, birds, ł	norses		
	Yes.	Describe		\$ 0	.00
14.	Any other p	personal and ho	usehold items you did not already list, including any health aids you did not list	<u></u>	
	Yes.	Describe		\$ 0	0.00
15.	Add the do	llar value of all	of your entries from Part 3, including any entries for pages you have attached		
			er here>	\$3,85	U.UU

Debtor 1

Vivian

Case 16-14536

Doc 1

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Desc Main

First Name

**Describe Your Financial Assets** Part 4: Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Describe..... Yes. 0.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses. and other similar institutions. If you have multiple accounts with the same institution, list each. No. Describe..... Account Type: Institution name: Yes. Savings Account Bank of America 0.00 **BMO Harris** Savings Account 25.00 Bank of America 100.00 Checking Account **BMO Harris** Checking Account 200.00 325.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Describe..... Institution or issuer name: 0.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in Describe..... Name of Entity and Percent of Ownership: Yes. 0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No. Describe..... Issuer name: Yes. 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No. Describe..... Type of account and Institution name: 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No. Yes. Describe..... Institution name or individual: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Describe..... Issuer name and description: 0.00 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No. Describe..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers No. Describe..... 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Nο Describe..... Yes.

0.00

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Document F Case 16-14536 Sharone Doc 1 <u>Vi</u>vian Debtor 1

First Name Middle Name Entered 04/28/16 17:12:39 Page 13 of 2 umber (if known) Desc Main

27. Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
No.	
Yes. Describe	\$0.00
Money or property owed to you?	Current value of the
	<pre>portion you own? Do not deduct secured claims or exemptions</pre>
28. Tax refunds owed to you  No.	
Yes. Describe	s 0.00
29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	<u> </u>
No.  Yes. Describe	
30. Other amounts someone owes you	\$0.00
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No.	
Yes. Describe	s 0.00
31. Interest in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	<u>\$</u>
No. Company Name & Beneficiary:	
Yes. Describe	\$0.00
32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  No.	
Yes. Describe	\$ 0.00
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment  Examples: Accidents, employment disputes, insurance claims, or rights to sue  No.	
Yes. Describe	\$0.00
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights  No.	<u> </u>
Yes. Describe	\$ 0.00
35. Any financial assets you did not already list	<u> </u>
Yes. Describe	\$ 0.00
26. Add the dellar value of all of your entries from Bort 4, including any entries for pages you have attached	\$
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$325.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?  No.	
Yes.	
	Current value of the portion you own? Do not deduct secured claims or exemptions

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First Name Middle Name Desc Main

38. Account	s receivable or commissions you already e	earned	
Yes	. Describe		\$ 0.00
	uipment, furnishings, and supplies		\$ <u> </u>
Example No.	s: Business-related computers, software, modems,	s, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
Yes	. Describe		<b>.</b> 0.00
40. Machine	ry, fixtures, equipment, supplies you use ir	in business, and tools of your trade	\$0.00
No.			
Yes	. Describe		\$0.00
41. Inventor	′		
No.	Describe		
Yes	. Describe		\$ 0.00
42. Interests	in partnerships or joint ventures	·	
No.	Name of Entity and Perce	ent of Ownership:	
Yes	. Describe		\$ 0.00
43. Custome	r lists, mailing lists, or other compilations	5	Ψ
No.			
Yes	. Describe		\$ 0.00
44. Any bus	ness-related property you did not already	list	\$0.00
No.			
Yes	. Describe		
			\$0.00
45. Add the	Iollar value of all of your entries from Part	t 5, including any entries for pages you have attached	
for Part 5	Write that number here	>	\$ 0.00
Part 6:	Describe Any Farm- and Commercial Fishing	g-Related Property You Own or Have an Interest In.	
	If you own or have an interest in farmland		
46. Do you o	wn or have any legal or equitable interest i	t in any farm- or commercial fishing-related property?	
Yes	. Describe		
	. 2000/150		\$0.00
47. Farm an			
No.	s: Livestock, poultry, farm-raised fish		
Yes	. Describe		
			\$0.00
48. Crops—	either growing or harvested		
Yes	. Describe		
			\$0.00
_	I fishing equipment, implements, machine	ery, fixtures, and tools of trade	
No.	. Describe		
	. 50001150		\$0.00
_	I fishing supplies, chemicals, and feed		
No.	Describe		
Yes	. Describe		\$0.00

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Pilot Name wildlie Name Last Name		
51. Any farm- and commercial fishing-related property you did not already list		
Yes. Describe		\$0.00
52. Add the dollar value of all of your entries from Part 6, including any entries for Part 6. Write that number here		\$0.00
Describe All Property You Own or Have an Interest in That You Did No	ot List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No.		
Yes. Describe		\$
54. Add the dollar value of all of your entries from Part 7. Write that number he	ere>	\$0.00
Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2		\$ 162,619.00
56. Part 2: Total vehicles, line 5	\$ 0.00	
57. Part 3: Total personal and household items, line 15	\$ 3,850.00	
58. Part 4: Total financial assets, line 36	\$ 325.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	\$ 0.00	
62. <b>Total personal property.</b> Add lines 56 through 61	\$ 4,175.00	\$ 4,175.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$455.704.00
00. Total of all property of ochequie A/D. Add life 00 + life 02		\$166,794.00

Official Form 106A/B Record # 708092 Schedule A/B: Property Page 6 of 6

Fill in this in	formation to ident	ify your case:	
Debtor 1	Vivian	Sharone	Armstrong
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of _	ILLINOIS(State)
Case Number	r		
(If known)			

## Official Form 106C

### **Schedule C: The Property You Claim as Exempt**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify	y the Property You Claim as Exempt			
Which set of exe	emptions are you claiming? Check	one only, even if your spo	ouse is filing with you.	
You are clain	ning state and federal nonbankrupto	cy exemptions . 11 U.S.C.	§ 522(b)(3)	
You are clair	ming federal exemptions. 11 U.S.C.	§ 522(b)(2)		
_				
For any property	y you list on <i>Schedule A/B</i> that yo	u claim as exempt, fill in t	the information below.	
•	n of the property and line on nat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	533 Hampshire Lane Bolingbrook IL 60440 - Primary Residence	\$_162,619	\$15,000	735 ILCS 5/12-901 - \$15,000.00
Line from Schedule A/B:	01		100% of fair market value, up to any applicable statutory limit	
Brief description:	Furniture, linens, small appliances, table & chairs, bedroom set	\$_2,500	<u></u> \$	735 ILCS 5/12-1001(b) - \$2,500.00
Line from Schedule A/B:	06		100% of fair market value, up to any applicable statutory limit	
Brief description:	Flat screen TV, computer, printer, music collection, cell phone	\$ <u>750</u>	<b></b> \$	735 ILCS 5/12-1001(b) - \$750.00
Line from Schedule A/B:	07		100% of fair market value, up to any applicable statutory limit	
Brief description:	Everyday clothes	\$ <u>200</u>	<u></u> \$	735 ILCS 5/12-1001(a),(e) - \$200.00
Line from Schedule A/B:	<u>11</u>		100% of fair market value, up to any applicable statutory limit	
Official Form 106C	Record # 708092	Schedule C: T	he Property You Claim as Exempt	Page 1 of 2

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Debtor 1 Vivian Sharone Document

**Additional Page** 

Part 2:

Middle Name

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 735 ILCS 5/12-1001(b) - \$300.00 Brief Everyday jewelry, costume jewelry description: \$ 300 Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(b) - \$0.00 Brief Savings Account, Bank of \$\_0 America, 0.00 description: 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit Brief Savings Account, BMO Harris, 735 ILCS 5/12-1001(b) - \$25.00 25.00 \$ 25 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief Checking Account, Bank of 735 ILCS 5/12-1001(b) - \$100.00 \$ 100 America, 100.00 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Checking Account, BMO Harris, 735 ILCS 5/12-1001(b) - \$200.00 Brief \$ 200 200.00 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) No. Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  $\square$  No ☐ Yes. 708092 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 2 of 2

	Caso 16	14526 Doc	1 Filed 04/29/16 Ente	red 04/28/16 17·12·30	Desc Main	
Fill in this i	information to ident	ify your case:		8 of 62	Deserviani	
Debtor 1	Vivian	Sharone	Armstrong			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for	the : <u>NORTHERN</u> D	District of <u>ILLINOIS</u>			
Case Numbe	er		(State)		Check if this	s is an
(If known)					amended fi	ling
Official F	orm 106D					
						12/1
			Claims Secured by Proper			12/1
nformation. If	more space is need	oossible. If two married ded, copy the Additio a and case number (if	ed people are filing together, both are equa onal Page, fill it out, number the entries, and f known).	d attach it to this form. On the top	ect of any	
1. Do any cr	editors have claims	secured by your pro	operty?			
∏ No. C	Check this box and su	ubmit this form to the	court with your other schedules. You have no	othing else to report on this form.		
	Fill in all of the inform		<b>,</b>	3		
103.1		ation below.				
Part 1:	List All Secured Cla	ims				
		and the state of t	Late the second state of t	Column A	Column A	Column C
			n one secured claim, list the creditor separate ticular claim, list the other creditors in Part 2.	Amount of clair	41-4	Unsecured portion
		•	order according to the creditors name.	Do not deduct the value of collatera	·	portion
2.1 Select	t Portfolio Svcin					If any
Cradit			Describe the property that secures the clai	m: \$ <u>99,261.00</u>	<u>\$ 162,619.00</u>	If any \$ 99,261.00
	's Name		Describe the property that secures the clain 533 Hampshire Lane Bolingbrook IL 6044		<b>\$</b> 162,619.00	
Po Box	x 65250				\$ <u>162,619.00</u>	
	x 65250		533 Hampshire Lane Bolingbrook IL 6044 Residence	0 - Primary	<b>\$</b> _162,619.00	
Po Box	x 65250		533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check	0 - Primary	<u>\$ 162,619.00</u>	
Po Box Number	x 65250	UT 84165	533 Hampshire Lane Bolingbrook IL 6044 Residence	0 - Primary	\$ <u>162,619.00</u>	
Po Box Number	x 65250 Street	UT 84165 State Zip Code	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent	0 - Primary	<u>\$ 162,619.00</u>	
Po Box Number  Salt La	x 65250 Street	State Zip Code	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated	0 - Primary	\$ <u>162,619.00</u>	
Po Box Number  Salt La City  Who owe	x 65250 Street  ake City  es the debt? Check on or 1 only	State Zip Code	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated Disputed	0 - Primary	\$ <u>162,619.00</u>	
Salt La City  Who owe	x 65250 Street  ake City  es the debt? Check one or 1 only or 2 only	State Zip Code	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated Disputed  Nature of Lien. Check all that apply.	0 - Primary	<u>\$ 162,619.00</u>	
Salt La City  Who owe Debtoi Debtoi	x 65250  Street  ake City  es the debt? Check on or 1 only or 2 only or 1 and Debtor 2 only	State Zip Code	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated Disputed  Nature of Lien. Check all that apply.  An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's lien)	0 - Primary  all that apply.	\$ <u>162,619.00</u>	
Salt La City  Who owe Debtoi Debtoi	x 65250 Street  ake City  es the debt? Check one or 1 only or 2 only	State Zip Code	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated Disputed  Nature of Lien. Check all that apply. An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's land) Judgment lien from a lawsuit	0 - Primary  all that apply.	\$ <u>162,619.00</u>	
Salt La City  Who owe Debtor Debtor At leas	x 65250  Street  ake City  es the debt? Check on or 1 only or 2 only or 1 and Debtor 2 only	State Zip Code ne. nd another	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated Disputed  Nature of Lien. Check all that apply.  An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's lien)	0 - Primary  all that apply.	\$ <u>162,619.00</u>	
Salt La City  Who owe Debtor Debtor At leas	ake City  ses the debt? Check on or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors an	State Zip Code ne. nd another	533 Hampshire Lane Bolingbrook IL 6044 Residence  As of the date you file, the claim is: Check Contingent Unliquidated Disputed  Nature of Lien. Check all that apply. An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's land) Judgment lien from a lawsuit	or secured	\$_162,619.00	

Fil	ll in this ir	Caso 16 of		1 Filed 04/29/16	Entered 04/ 9 of 6	/28/16 17:12: 2	39 [	Desc Main	
D	ebtor 1	Vivian	Sharone	Armstrong					
	CDIOI I	First Name	Middle Name	Last Name					
D	ebtor 2								
(S	pouse, if filing)	First Name	Middle Name	Last Name					
U	nited States	s Bankruptcy Court for th	ne : <u>NORTHERN</u> D	District of <u>ILLINOIS</u>					
C	aaa Numba	r		(State)				Check if	f this is an
	ase Numbe f known)							— amende	ed filing
∩ff	icial F	orm 106E/F	:						-
			<del>-</del>						12/1
				e Unsecured Claims or creditors with PRIORITY claims a					12/13
credi needd op o	tors with ped, copy to fany addi	partially secured cla he Part you need, fil itional pages, write y	ims that are listed in	, ,	Claims Secured b	y Property. If more s	pace is	e any	
1 [	o any cre	editors have priority	unsecured claims a	gainst you?					
1. E	_		unsecureu ciaims a	gamst your					
L		o to Part 2.							
	Yes.			the state of the s	and deleter Bakiller			. F.,	
	-	· · · · · ·		itor has more than one priority unsec claim has both priority and nonprior		•			
			= -	aims in alphabetical order according	-			<del>-</del>	
			•	Part 1. If more than one creditor holds	•	list the other creditor	s in Part 3	3.	
(	rui ali ex	pianation of each typ	e of claim, see the in	structions for this form in the instruct	ion bookiet.)	Total	claim	Priority	Nonpriority
	_							amount	amount
2.1		Department of Rever	nue	Last 4 digits of account number		\$ <u>852.</u>	.00	<b>\$</b> 852.00	\$ <u>0.00</u>
	Creditor's PO Box	Name x 19044		When was the debt incurred?	2010				
	Number	Street				•			
				As of the date you file, the claim is:	: Check all that apply				
				Contingent					
	Springf	rield	IL 62794-9044	Unliquidated					
	City Who owes	s the debt? Check one	State Zip Code .	Disputed					
	Debtor	1 only							
	Debtor	2 only		Type of PRIORITY unsecured claim	1:				
	Debtor	1 and Debtor 2 only		Domestic support obligations					
	At leas	t one of the debtors and	l another	Taxes and certain other debts you	owe the government				
	_	if this claim relates t	оа						
		unity debt		Claims for death or personal injury	while you were				
		im subject to offest?		intoxicated					
	No Yes			Other. Specify					

Debtor 1 Vivian Sharone Document Page 20 of 62 Case Number (if known)

First Name Middle Name Last Nam

Part 1: Your PRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them b	eginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
2.2 IRS Priority Debt	Last 4 digits of account number	\$ <u>1,800.00</u>	<b>\$</b> _1,800.00	\$ <u>0.00</u>
Creditor's Name PO Box 7346  Number Street	When was the debt incurred? 2013			
Philadelphia PA 19101	As of the date you file, the claim is: Check all that apply.  Contingent			
City State Zip Code Who owes the debt? Check one.  Debtor 1 only	Unliquidated Disputed			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government			
Check if this claim relates to a community debt Is the claim subject to offest?	Claims for death or personal injury while you were intoxicated  Other. Specify			
Yes Priority Dobt		<b>\$</b> 3,000.00	<b>a</b> 2 000 00	<b>*</b> 0 00
Creditor's Name PO Box 7346	Last 4 digits of account number	\$_3,000.00	\$ <u>3,000.00</u>	\$ <u>0.00</u>
Number Street	As of the date you file, the claim is: Check all that apply.			
Philadelphia PA 19101  City State Zip Code  Who owes the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government			
Check if this claim relates to a community debt Is the claim subject to offest?	Claims for death or personal injury while you were intoxicated			
Yes Priority Dobt	Other. Specify	\$ 3,200.00	<b>*</b> 2 200 00	<b>*</b> 0.00
Creditor's Name PO Box 7346	Last 4 digits of account number	\$_3,200.00	\$ 3,200.00	\$ <u>0.00</u>
Number Street				
Philadelphia PA 19101  City State Zip Code  Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government			
Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes	Claims for death or personal injury while you were intoxicated  Other. Specify			

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Case Number (if known) Document Vivian Sharone

Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims							
3. <b>D</b> o	3. Do any creditors have nonpriority unsecured claims against you?						
	No. You have nothing to report in this part. Submit this form to the court with your other schedules.						
	Yes.						
no in	onpriority unsecured claim, list the creditor separa	e alphabetical order of the creditor who holds each claim. If a creditor has more than one tely for each claim. For each claim listed, identify what type of claim it is. Do not list claims already particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured					
			Total claim				
4.1	Advance America  Creditor's Name	Last 4 digits of account number	\$ <u>0.00</u>				
	446 N. Mannheim Rd	When was the debt incurred? 2014					
	Number Street						
		As of the date you file, the claim is: Check all that apply.					
		Contingent					
	Bellwood IL 60104	Unliquidated					
١,	City State Zip Code  Who owes the debt? Check one.	Disputed					
l i	Debtor 1 only						
l i	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	<b>=</b>	Student loans					
	Debtor 1 and Debtor 2 only						
!	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce					
	Check if this claim relates to a	that you did not report as priority claims					
١.	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts					
l i	No	Tay a graphy lean					
	Yes	Other. Specify PayDay Loan					
4.2	Adventist Hinsdale Hospital	Last 4 digits of account number	\$ 0.00				
4.2	Creditor's Name		•				
	PO Box 9247	When was the debt incurred? 2014					
	Number Street						
		As of the date you file, the claim is: Check all that apply.					
	Oak Brook IL 60522	Contingent					
	City State Zip Code	Unliquidated					
١ ١	Who owes the debt? Check one.	Disputed					
	Debtor 1 only						
l i	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
l i	Debtor 1 and Debtor 2 only	Student loans					
1	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce					
	=	that you did not report as priority claims					
'	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	s the claim subject to offest?	Debts to pension of professioning plans, and other similar debts					
	No	Other. Specify Medical/Dental Services					
	Yes	Outer. opecity					
4.3	Adventist LaGrange Mem. Hosp.	Last 4 digits of account number	\$ <u>0.00</u>				
	Creditor's Name	••••					
	PO Box 9234	When was the debt incurred? 2014					
	Number Street						
		As of the date you file, the claim is: Check all that apply.					
		Contingent					
	Oak Brook IL 60522						
	City State Zip Code	Unliquidated					
'	Who owes the debt? Check one.	Disputed					
	Debtor 1 only						
	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only	Student loans					
i	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce					
i	Check if this claim relates to a	that you did not report as priority claims					
'	community debt	Debts to pension or profit-sharing plans, and other similar debts					
1	s the claim subject to offest?	<del>_</del>					
	No	Other. Specify Medical/Dental Services					
l i	T <sub>Von</sub>						

Schedule E/F: Creditors Who Have Unsecured Claims

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Case Number (if known) Document Vivian Sharone Debtor 1

After	listing any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.4	AmeriCash Loans	Last 4 digits of account number	<b>\$</b> 5,226.00
	Creditor's Name		
	880 Lee St., Ste. 302	When was the debt incurred? 2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Des Plaines IL 60016	Unliquidated	
	City State Zip Code	Disputed	
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	_	
	No	Other. Specify PayDay Loan	
	Cash Net USA		\$ 0.00
4.5		Last 4 digits of account number	\$ 0.00
	Creditor's Name PO Box 643990	When was the debt incurred? 2015	
	Number Street		
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Cincinnati OH 46264	Contingent	
	City State Zip Code	Unliquidated	
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No	Other. Specify Payday	
	Yes		
4.6	CastlePayDay.com	Last 4 digits of account number	\$ <u>2,000.00</u>
	Creditor's Name	2011	
	PO Box 704	When was the debt incurred? $\frac{2014}{}$	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Watersmeet MI 49969	Unliquidated	
	City State Zip Code	Disputed	
	Who owes the debt? Check one.	☐	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	■	
	$\vdash$	Other. Specify PayDay Loan	
	Yes		

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Case Number (if known) Document Vivian Sharone Debtor 1

Pa	Your NONPRIORITY Unsecured Claims - C	Continuation Page	
After	listing any entries on this page, number them b	peginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.7	Centegra Memorial Medical Center	Last 4 digits of account number	<u>\$ 586.00</u>
	Creditor's Name	When was the debt incurred? 2014	
	3701 Doty Rd	When was the debt incurred? 2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Woodstock IL 60098	Unliquidated	
	City State Zip Code  Who owes the debt? Check one.	Disputed	
	Debtor 1 only	_	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	Debte to periodical profit channel plane, and other chinical debte	
	No	Other. Specify Medical Debt	
	Yes		
4.8	Central DuPage Hospital	Last 4 digits of account number	<u>\$_617.00</u>
	Creditor's Name	When was the debt incurred? 2014	
	25 N. Winfield Rd.	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Winfield IL 60190	Unliquidated	
	City State Zip Code  Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No	Other. Specify Medical/Dental Services	
	Yes		
4.9	Certegy	Last 4 digits of account number	\$ <u>0.00</u>
	Creditor's Name	When was the debt incurred? 2014	
	5 Revere Dr	When was the debt incurred? 2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Northbrook IL 60062	Contingent	
		Unliquidated	
	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	<del>-</del>	
	No	Other. Specify NSF Checks	
	Yes	<u> </u>	

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Case Number (if known) Document Vivian Sharone Debtor 1

Pa	Your NONPRIORITY Unsecured Claims - C	ontinuation Page		
After	listing any entries on this page, number them b	eginning with 4.4, followed by 4.5, ar	nd so forth.	Total Claim
4.10	Collectron	Last 4 digits of account number	2405	<u>\$_619.00</u>
	Creditor's Name		2014-2014	
	119 Southern Blvd	When was the debt incurred?	2014-2014	
	Number Street			
		As of the date you file, the claim is:	: Check all that apply.	
	Savannah GA 31405	Contingent		
	Savannah GA 31405  City State Zip Code	Unliquidated		
	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured of	claim:	
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separati	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla	aims	
	community debt	Debts to pension or profit-sharing p	lans, and other similar debts	
	Is the claim subject to offest?			
	Mo No Yes	Other. Specify Medical Debt		
4.11	Diversified Consultants, Inc.	Last 4 digits of account number		<b>\$</b> 145.00
7.11	Creditor's Name		<del></del>	·
	PO Box 551268	When was the debt incurred?	2014	
	Number Street			
		As of the date you file, the claim is:	: Check all that apply.	
		Contingent		
	Jacksonville FL 32255	Unliquidated		
	City State Zip Code  Who owes the debt? Check one.	Disputed		
	Debtor 1 only	_		
	Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separati	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla	aims	
	community debt	Debts to pension or profit-sharing p	lans, and other similar debts	
	Is the claim subject to offest?	_		
	■ No	Other. Specify Debt Owed		
4.12	H&R Accounts	Last 4 digits of account number		\$ 0.00
4.12	Creditor's Name	Last 4 digits of account number _		<u> </u>
	7017 John Deere Pkwy	When was the debt incurred?	2014	
	Number Street			
		As of the date you file, the claim is:	: Check all that apply.	
		Contingent		
	Moline IL 61265	Unliquidated		
	City State Zip Code  Who owes the debt? Check one.	Disputed		
	Debtor 1 only	_		
	Debtor 2 only	Type of NONPRIORITY unsecured (	claim:	
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separati	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla		
	community debt	Debts to pension or profit-sharing p	lans, and other similar debts	
	Is the claim subject to offest?			
	No	Other. Specify		
	Yes			

Schedule E/F: Creditors Who Have Unsecured Claims

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Afte	r list	ting any entries on this page, number them be	ginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.13	3 _	IRS Non-Priority	Last 4 digits of account number	<b>\$</b> 26,000.00
	_	Creditor's Name PO Box 7346  Number Street	When was the debt incurred? 2004-2008	
	-		As of the date you file, the claim is: Check all that apply.  Contingent	
	-	Philadelphia PA 19101	Unliquidated	
		City State Zip Code  tho owes the debt? Check one.	Disputed	
		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce	
	Ē	Check if this claim relates to a	that you did not report as priority claims	
	Is	community debt the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
		No Yes	Other. Specify Taxes - Federal, State/Local	
4.14	┷ -	LaGrange Memorial Hospital	Last 4 digits of account number	\$ <u>0.00</u>
		Creditor's Name 5101 S. Willow Springs Rd	When was the debt incurred? 2014	
		Number Street		
	-		As of the date you file, the claim is: Check all that apply.	
		LaGrange IL 60525	Contingent	
		City State Zip Code	☐ Unliquidated ☐ Disputed	
	W	ho owes the debt? Check one.		
	F	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	F	Debtor 1 and Debtor 2 only	Student loans	
	F	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	늗	Check if this claim relates to a	that you did not report as priority claims	
	_	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is	the claim subject to offest?	_	
		No Yes	Other. Specify Medical/Dental Services	
4.1	<u>-</u>	LaGrange Womens Clinic  Creditor's Name	Last 4 digits of account number	\$ <u>145.00</u>
	-	5201 S. Willow Springs Rd Ste 490  Number Street	When was the debt incurred? 2014	
	-		As of the date you file, the claim is: Check all that apply.	
		La Grange IL 60525	Contingent	
	-	City State Zip Code	Unliquidated	
	WI	ho owes the debt? Check one.	Disputed	
	F	Debtor 1 only	Type of NONDRIGOTY upgestred elem-	
	F	Debtor 2 only  Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:  Student loans	
	F	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	F	<b>-</b>	that you did not report as priority claims	
	ᆫ	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is	the claim subject to offest?	— · · · · · · · · · · · · · · · · · · ·	
		No No	Other. Specify	
		Yes		

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Case Number (if known) Document Vivian Sharone Debtor 1

After I	isting any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.16	Merchants Credit Guide	Last 4 digits of account number4553	<b>\$</b> 112.00
	Creditor's Name  223 W Jackson Blvd Ste 4	When was the debt incurred? 2015-2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago IL 60606	Unliquidated	
,	City State Zip Code  Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim: ☐	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No	Other. Specify Medical Debt	
	Yes Merchants Credit Guide	Last 4 digits of account number 2520	<b>↑</b> 521.00
4.17		Last 4 digits of account number2520	\$ <u>521.00</u>
	Creditor's Name	When was the debt incurred? 2012-2012	
	223 W Jackson Blvd Ste 4	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago IL 60606	Unliquidated	
١,	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No T	Other. Specify Medical Debt	
	Yes Payday Loan Store	Land A. Marka of an armshare	\$ 0.00
4.18		Last 4 digits of account number	\$ <u>0.00</u>
	Creditor's Name 17 W 625 Roosevelt Rd	When was the debt incurred? 2013	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Oaldanada Tannada III. 00404	Contingent	
	Oakbrook Terrace IL 60181	Unliquidated	
,	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only	<del>-</del>	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	=	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another		
	Check if this claim relates to a	that you did not report as priority claims	
	community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Pay Paylogn	
	Yes	Other. Specify PayDay Loan	
	1 Co		

Debtor 1 Vivian Sharone Document Page 27 of 62 Case Number (if known)

Last 4 digits of account number	After	listing any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
Controver Name  Stock 1 or 19	4.19	Progressive Insurance	Last 4 digits of account number	\$ <u>0.00</u>
Name   New			<del></del>	
Richmond Heights II. 44143  Who was the debt? Check one of the debtos and another Debtor 1 and year of the debt one of the debtos and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor and another Debtor 1 and year of the debtor 2 and year of the debtor and another Debtor 1 and year of the debtor 2 and year of the debtor 2 and year of the debtor 2 and year of the debtor 3 and year of year of the debtor 3 and year of year of the debtor 3 and year o		6300 Wilson Mills Rd	When was the debt incurred? 2014	
Richmond Heights IL 44143 Cy Who owes the debt? Creach one.    Debtor of not)		Number Street		
Richmond Heights IL 44143 Cy Who owes the debt? Creach one.    Debtor of not)			As of the date you file the claim is: Check all that apply	
Richmond Heights II. 44143   Uniquidated City Crock One.   Salize 7 Cock One.   Desport of not)   Debtor 2 not)   Debtor 2 not)   Debtor 2 not)   Debtor 2 not)   Debtor 3 not   Debtor 4 not   Debtor 5 not   Debtor 5 not   Debtor 5 not   Debtor 5 not   Debtor 6				
Cy State 7 pCode Who owes the debt? Check one.    Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 4 and Debtor 4 only   Debtor 4 and Debtor 5 only   Debtor 6 only		Richmond Heights IL 44143		
Depated   Depa				
Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Shudent bars   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Shudent bars   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only			Disputed	
Debetor 1 and Debtor 2 only   Subsert Name   Check if this claim relates to a community debt   St. Joseph Hospital   Debetor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   No   State 2 only   Debtor 1 and Debtor 2 only   No   Debtor 1 and Debtor 2 only   No   Debtor 1 and Debtor 2 only   No   No   Debtor 2 only   No   Debtor 2 only   No   Debtor 2 only   No   No   Debtor 2 only   No   No   Debtor 2 only   Debtor 2 only   No   Debtor 2 only   Deb		Debtor 1 only		
Debetor 1 and Debtor 2 only   Subsert Name   Check if this claim relates to a community debt   St. Joseph Hospital   Debetor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   No   State 2 only   Debtor 1 and Debtor 2 only   No   Debtor 1 and Debtor 2 only   No   Debtor 1 and Debtor 2 only   No   No   Debtor 2 only   No   Debtor 2 only   No   Debtor 2 only   No   No   Debtor 2 only   No   No   Debtor 2 only   Debtor 2 only   No   Debtor 2 only   Deb		Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another   Chack if this claim relates to a community debt   St. Joseph Hospital   Check if this claim relates to a community debt   Last 4 digits of account number   \$619.00			ri 🗂	
Check if this claim relates to a community debt   Commu		=		
community debt is the claim subject to offest?    No				
Is the claim subject to offest?    No				
No			Debts to pension of profit-sharing plans, and other similar debts	
Ves   Last 4 digits of account number   \$ 619.00				
St. Joseph Hospital     Last 4 digits of account number   \$ 619.00		$\blacksquare$	Other. Specify	
Creditor's Name  1/1705 Merry Blvd  Number  Street  As of the date you file, the claim is: Check all that apply.  Contingent  Student loans  Contingent  Contingent  Contingent  Contingent  Contingent  Contingent  Contingent  Contingent  As of the date you file, the claim is: Check all that apply.  Contingent  Conting	4.00	Ct. Jaconh Llagnital	Last 4 digits of account number	<b>¢</b> 619.00
11705 Mercy Blvd   Number   Street   Savannah   GA 31419   Contingent   Unliquidated   Unliquidated   Disputed   Unliquidated   Disputed   Di	4.20		Last 4 digits of account number	Ψ
Number   Street   Savannah   GA   31419   Contingent   Check of the debtor and another   Check if this claim relates to a community debt   Check one.   Contingent   Check if this claim subject to offest?   Check one.   Check if this claim relates to a community debt   Check one.   Check if this claim relates to a community debt   Check one.   Check if this claim relates to a community debt   Check one.   Check if this claim relates to a community debt   Check one.   Check if this claim relates to a community debt   Check one.   Check if this claim relates to a community debt   Check one.   Chec			When was the debt incurred? 2014	
As of the date you file, the claim is: Check all that apply.    City   State   Zip Code   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   State   Code   Debtor 1 and Debtor 3 only   State   Code   Debtor 1 only   Debtor 1 and Debtor 3 only   State   Code   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 3 only   Debtor 4 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 1 only   Debtor 5 only   Debtor 1 only   Debtor 5 only   Debtor 1 only				
Savannah GA 31419 City State Zip Code Who owes the debt? Check one.    Debtor 1 only     Debtor 2 only     Debtor 2 only     Debtor 1 and Debtor 2 only     Debtor 1 find Debtor 2 only     Debtor 1 state Collection Service Inc.    Creditor's Name		Number Street		
Savannah GA 31419 City State Zp Code Who owes the debt? Check one.  Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Community debt is the claim subject to offest?  Madison Debtor 1 only  Madison Debtor 2 only Debtor 1 only  Debtor 1 only Ves  4.21  Madison Debtor 2 only Debtor 2 only Debtor 3 mane Zeo9 South Stoughton Road Number Street  Madison Debtor 3 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 laest one of the debtors and another City Who owes the debt? Check one. Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 of the debtor 8 ond only Debtor 6 only Debtor 7 only Debtor 8 one of the debtor 8 ond only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Oligations arising out of a separation agreement or divorce that you did not report as priority claims Configuration agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Type of NONPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts  Type of NONPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts  Type of NONPRIORITY unsecured claims Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim is: Check all that apply.	
City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Community debt Is the claim subject to offest?  No Ves  4.21 State Collection Service Inc. Creditor's Name 2509 South Stoughton Road Number Street  Madison WI 53716 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 onlog Debtor 2 only Debtor 2 only Debtor 1 onlog Debtor 2 only Debtor 2 onlog Debtor 2 onlog Debtor 2 onlog Debtor 3 onlog Debtor 4 onlog Debtor 5 onlog Debtor 4 onlog Debtor 5 onlog Debto		0 1 01 01 10	Contingent	
Debtor 1 only			Unliquidated	
Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 she claim relates to a community debt Is the claim subject to offest?  Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Last 4 digits of account number Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Last 2 only Last 2 only Debtor 1 only Debtor 2 only Last 2 only Debtor 1 only Debtor 2 only Last 2 only Debtor 1 only Debtor 2 only Last 2 only Last 2 only Debtor 3 only Debtor 1 only Debtor 2 only Last 2 only Debtor 3 only Last 2 only Debtor 4 only Debtor 2 only Last 2 only Last 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 only Last 2 only Debtor 4 only Debtor 5 only Debtor 5 only Last 2 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Oligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts  Others. Specify Collecting for Creditor			Disputed	
Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Al least one of the debtors and another   Check if this claim relates to a community debt   State Collection Service Inc.   Caption Street   Caption State Zip Code				
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes  4.21 State Collection Service Inc. Creditor's Name 2509 South Stoughton Road Number Street  Madison City Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Other. Specify Medical/Dental Services  Unliquidated Disputed  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Corealized As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 only Debtor 4 and Debtor 2 only Debtor 4 claim relates to a community debt Debtor 4 claim subject to offest?  No Other. Specify Collecting for Creditor				
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Other. Specify Medical/Dental Services  Creditor's Name  2509 South Stoughton Road  Number Street  Madison WI 53716  City State Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Other. Specify Medical/Dental Services  Last 4 digits of account number 2013  When was the debt incurred? 2013  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  Other. Specify Collecting for Creditor		= '		
Check if this claim relates to a community debt   State   Collection Service   Inc.   Creditor's Name   2509 South Stoughton Road   Number   Street   State   Zip Code   Who owes the debt? Check one.   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   At least one of the debtors and another   Check if this claim relates to a community debt   State   Collecting state   Check if this claim relates to a community debt   State   Collecting for Creditor   Cottens and another   Check if this claim relates to a community debt   State   Collecting for Creditor   Cottens and another   Check if this claim relates to a community debt   Cottens and another   Check if this claim relates to a community debt   Cottens and another   Check if this claim subject to offest?		Debtor 1 and Debtor 2 only		
community debt is the claim subject to offest?  No Ves  4.21 State Collection Service Inc.  Creditor's Name 2509 South Stoughton Road Number Street  Madison City Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offest?  No Other. Specify Medical/Dental Services  Medical/Dental Services  Vhen was the debt incurred? 2013  As of the date you file, the claim is: Check all that apply. Contingent Unificuldated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  No Other. Specify Collecting for Creditor		At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Is the claim subject to offest?  No Other. Specify Medical/Dental Services    Yes		Check if this claim relates to a	that you did not report as priority claims	
No   Yes   Other. Specify   Medical/Dental Services		· · · · · · · · · · · · · · · · · · ·	Debts to pension or profit-sharing plans, and other similar debts	
Yes   State Collection Service Inc.   Last 4 digits of account number   \$0.00		Is the claim subject to offest?		
State Collection Service Inc.   Last 4 digits of account number   \$0.00		No	Other. Specify Medical/Dental Services	
Creditor's Name 2509 South Stoughton Road  Number Street  Madison WI 53716 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Creditor's Name 2013  When was the debt incurred? 2013  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor				
Madison   WI   53716   City   State   Zip Code   Who owes the debt? Check one.   Debtor 1 only   Debtor 2 only   At least one of the debtors and another   Check if this claim relates to a community debt   Is the claim subject to offest?   No   When was the debt incurred?   2013      Madison   WI   53716   Contingent   Unliquidated   Unliquidated   Disputed   Disputed	4.21	State Collection Service Inc.	Last 4 digits of account number	\$ <u>0.00</u>
Number Street  Madison WI 53716 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Madison WI 53716 Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor			2042	
Madison  City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Cobligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		2509 South Stoughton Road	When was the debt incurred? 2013	
Madison  WI 53716 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		Number Street		
Madison  WI 53716 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor			As of the date you file, the claim is: Check all that apply.	
Madison WI 53716 City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims community debt Is the claim subject to offest?  No  Other. Specify Collecting for Creditor				
City State Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims community debt Debts to pension or profit-sharing plans, and other similar debts  Is the claim subject to offest?  No Other. Specify Collecting for Creditor		Madison WI 53716		
Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims community debt Debts to pension or profit-sharing plans, and other similar debts  Step of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		City State Zip Code		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?  No  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		Who owes the debt? Check one.	Disputed	
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		Debtor 1 only		
At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for Creditor		Debtor 1 and Debtor 2 only	Student loans	
Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts  Is the claim subject to offest?  No Other. Specify Collecting for Creditor				
community debt  Is the claim subject to offest?  No  Other. SpecifyCollecting for Creditor				
Is the claim subject to offest?  No Other. Specify Collecting for Creditor				
No Other. Specify Collecting for Creditor			Design to be be beginned in the beautiful and of the second of the secon	
			Other Specific Collecting for Creditor	
		Yes	Other. Specify	

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r 1 <u>Vivian</u> Sharone	Document Page 28 of 62 Case Number (if known)	
First Name Middle Name	Last Name	
art 2+ Your NONPRIORITY Unsecured Claims -	Continuation Page	
listing any entries on this page, number them	beginning with 4.4, followed by 4.5, and so forth.	Total Claim
US Cellular	Last 4 digits of account number	\$ <u>280.00</u>
Creditor's Name	When was the debt incurred? 2013	
PO Box 7835	When was the debt incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Madison WI 53707-7835	Contingent	
	Unliquidated Unliquidated	
City State Zip Code  Who owes the debt? Check one.	Disputed	
Debtor 1 only	_	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other. Specify Utility Bills/Cellular Service	
Yes	Other. SpecifyOthins/Cellular Service	
Village of Bolingbrook	Last 4 digits of account number	<b>\$</b> 0.00
Creditor's Name		*
375 W. Briarcliff Rd.	When was the debt incurred? 2015	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Bolingbrook IL 60440	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
Debtor Faria Debtor 2 only		
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another  Check if this claim relates to a	that you did not report as priority claims	
At least one of the debtors and another  Check if this claim relates to a community debt		
At least one of the debtors and another  Check if this claim relates to a	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?	that you did not report as priority claims	
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Fines	
At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  List Others to Be Notified for a Debt Th  see this page only if you have others to be notified to ample, if a collection agency is trying to collect fig., then list the collection agency here. Similarly, if y	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Fines	
At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offest?  No  Yes  List Others to Be Notified for a Debt Th se this page only if you have others to be notified ample, if a collection agency is trying to collect fithen list the collection agency here. Similarly, if y	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Fines  hat You Already Listed  d about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For from you for a debt you owe to someone else, list the original creditor in Parts 1 or you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the	
At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offest?  No  Yes  List Others to Be Notified for a Debt The set this page only if you have others to be notified (ample, if a collection agency is trying to collect fitten list the collection agency here. Similarly, if you do not have additional creditors here. If you do not have additional creditors here.	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Fines  hat You Already Listed  d about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For from you for a debt you owe to someone else, list the original creditor in Parts 1 or you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the onal persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.	d Claims

MA 02061

State Zip Code

Norwell

City

Last 4 digits of account number \_\_\_\_\_\_

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Vivian Debtor 1

Sharone

6i. Other. Add all other nonpriority unsecured claims.

Write that amount here.

6j. Total. Add lines 6f through 6i.

Document

Page 29 of 62 Case Number (if known)

36,870.00

36,870.00

Add the Amounts for Each Type of Unsecured Claim

	ounts of certain types of unsecured claims. This information is unts for each type of unsecured claim.	for statistical rep	porting purposes only. 28 U.S.C. § 159.
			Total claim
Total claims from Part 1	6a. Domestic support obligations	6a.	\$0.00
	6b. Taxes and Certain other debts you owe the government	6b.	\$8,852.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$8,852.00
			Total claim
Total claims from Part 2	6f. Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00

Schedule E/F: Creditors Who Have Unsecured Claims

		Caso 16	: 14526 Doc 1 E	ilad 04/29/16	Entor	ed 04/28/16 17:	12:39	Desc Main	
Fi	ll in this in	formation to iden	tify your case:			0 of 62		2000	
D	ebtor 1	Vivian	Sharone	Armstrong	-				
D	ebtor 2	First Name	Middle Name	Last Name					
	pouse, if filing)	First Name	Middle Name	Last Name	•				
U	nited States	Bankruptcy Court fo	r the : <u>NORTHERN</u> District of <u>II</u>						
	ase Number f known)			(State)				Check if this is a amended filing	an
Off	icial F	orm 106G							
Scł	nedule	G: Execut	ory Contracts and l	Jnexpired Lea	ses				12/15
3e as	complete	and accurate as	possible. If two married people eded, copy the additional page,	are filing together, bot fill it out, number the e	h are equall	y responsible for supplyi attach it to this page. On t	ng correct the top of an	ny	
additi	ional page	s, write your nam	e and case number (if known).	,	,			•	
1. L	_	-	contracts or unexpired leases? submit this form to the court with	your other schedules. V	ou have not	ning also to roport on this t	form		
	_		mation below even if the contracts						
_	<b>—</b> 163.111	in an or the mion	nation below even if the contract	o or leases are listed in	Scriedule A	D. I Toperty (Omeiai i omi	100A/B)		
			or company with whom you hav						
	xample, re nexpired le		cell phone). See the instructions	for this form in the inst	ruction book	let for more examples of e	xecutory con	ntracts and	
	Person or	company with wl	hom you have the contract or le	ase		State what the conti	ract or lease	is for	
2.1	1								
2.1	Name				_				
	Number	Street			_				
	Number	Street							
	City		State Zip C	ode	_				
2.2					_				
	Name								
	Number	Street			_				
	City		State Zip C	ode	_				
2.3			<u> </u>						
2.0	Name				_				
	Number	Street			_				
	Number	Street							
	City		State Zip C	ode	_				
2.4									
	Name				-				
	Number	Street			-				
					_				
	City		State Zip C	ode					
2.5					_				
	Name				_				
	Number	Street							

State Zip Code

City

Official Form 106G

Fill in this in	Fill in this information to identify your case:					
Debtor 1	Vivian	Sharone	Armstrong			
	First Name	Middle Name	Last Name			
Debtor 2	-					
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court fo	or the : <u>NORTHERN</u> District of _				
Case Number		(State)				
(If known)						

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

any A	dditional Pag	es, write your name and case	number (if Known). Answ	er every question.				
1. <b>D</b>	o you have a	ny codebtors? (If you are filing	g a joint case, do not list eit	her spouse as a coo	debtor.)			
	■ No. □ Yes							
		<b>8 years, have you lived in a c</b> rnia, Idaho, Lousiiana, Nevada		• ,	nunity property states and territories include n, and Wisconsin.)			
	No. Go to I	ine 3.						
	Yes. Did yo	our spouse, former spouse, or	legal equivalent live with yo	ou at the time?				
	_	nwhich community state or ter	ritory did you live?	Fill	in the name and current address of that person.			
	Name of	your spouse, former spouse or legal equ	uivalent	<del></del> ,				
	Number	Street						
	City		State	Zip Code				
s	-	or Schedule G to fill out Colu			ficial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:			
3.1					Schedule D, line			
	Name				Schedule E/F, line			
	Number	Street			Schedule G, line			
	City		State	Zip Code				
3.2					Schedule D, line			
	Name				Schedule E/F, line			
	Number	Street			Schedule G, line			
	City		State	Zip Code				
3.3					Schedule D, line			
	Name				Schedule E/F, line			
	Number	Street			Schedule G, line			
	City		State	Zip Code				

Official Form 106H Record # 708092 Schedule H: Your Codebtors Page 1 of 1

Fill in this in	nformation to ident	ify your case:	Document Page	e 32 of 62
Debtor 1	Vivian First Name	Sharone Middle Name	Armstrong  Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
	, ,	the :NORTHERN DISTRICT O		Check if this is:  An amended filing
				A supplement showing post-petition chapter 13 income as of the following date:
ficial F	orm 106I			MM / DD / YYYY
- l dI	- I. V I			

**Schedule I: Your Income** 

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment								
1. Fill in your employment information		Debtor 1		Debtor 2 or non-filing spouse				
If you have more than one job, attach a separate page with information about additional employers.	Employment status	X Employed Not employed	1	Employed  Not employed				
Include part-time, seasonal, or self-employed work.	Occupation	Retired						
Occupation may Include student or homemaker, if it applies.	Employers name							
	Employers address							
		,		3				
	How long employed there?							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.								
			For Debtor 1	For Debtor 2 or non-filing spouse				
List monthly gross wages, salar deductions). If not paid monthly, or the salar deductions of the salar deductions of the salar deductions.		\$0.00	\$0.00					
3. Estimate and list monthly overti		\$0.00	\$0.00					
4. Calculate gross income. Add line 2 + line 3.			\$0.00	\$0.00				

 Official Form 106I
 Record # 708092
 Schedule I: Your Income
 Page 1 of 2

Document Sharone Vivian Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name

			For Debtor 1	For Deb	tor 2 or ng spouse
C	opy line 4 here	4.	\$0.00		\$0.00
5. List	all payroll deductions:				
58	a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00
5k	o. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00
50	c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00
50	d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00
56	e. Insurance	5e.	\$0.00		\$0.00
5f	Domestic support obligations	5f.	\$0.00		\$0.00
50	g. Union dues	5g.	\$0.00		\$0.00
5h	n. Other deductions. Specify:	5h.	\$0.00		\$0.00
6. <b>Add</b>	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$0.00		\$0.00
7. Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$0.00
8. List a	all other income regularly received:	_			
88	a. Net income from rental property and from operating a business,				
	profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				
	monthly net income.	8a.	\$0.00		\$0.00
81	o. Interest and dividends	8b.	\$0.00		\$0.00
80	c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$ 0.00		\$ 0.00
	Include alimony, spousal support, child support, maintenance, divorce				
0.	settlement, and property settlement.	0.1			
80	, ,	8d. 	\$0.00		\$0.00
86	·	8e. —	\$0.00		\$0.00
8f		8f. —	\$0.00		\$0.00
	Include cash assistance and the value (if known) of any non-cash				
	assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:				
89		8g.	\$5,811.17		\$0.00
81		8h.	\$0.00		\$0.00
9. <b>A</b>	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$5,811.17		\$0.00
10. <b>C</b> :	alculate monthly income. Add line 7 + line 9.	10.	¢5 044 47	<sub>+</sub>	0 00
	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L	\$5,811.17	<sup>+</sup> \$	0.00
11. Si In ot	•	l <b>le J</b> . your dependen		nd	<b>0.00</b> <i>J.</i>
		acult is the com	whined monthly income		
W	dd the amount in the last column of line 10 to the amount in line 11. The re rite that amount on the Summary of Schedules and Statistical Summary of C	Certain Liabilitie	•		
_	o you expect an increase or decrease within the year after you file this form  X  No.  Yes. Explain:	m?			

Fill in this ir	nformation to identify you	ur case:				
Debtor 1	Vivian	Sharone	Armstrong	Check if this is	<b>3</b> :	
	First Name	Middle Name	Last Name	An amen	Ū	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	<u> </u>	ment snowing pos s of the following (	t-petition chapter 13 date:
United States	Bankruptcy Court for the : _	NORTHERN DISTRICT O	F ILLINOIS			
Case Numbe	r		_	MM / DD	/ YYYY	
Off: -: -1 E	400 l			A separa	te filing for Debtor	2 because Debtor 2
<u>Oπiciai F</u>	orm 106J			maintains	s a separate house	ehold.
Schedul ———	e J: Your Exp	enses				12/14
=				re equally responsible for suppl es, write your name and case no		
Part 1:	Describe Your Household					
1. Is this a joi	int case?					
	Go to line 2.					
Yes.	Does Debtor 2 live in a s	eparate nousehold?				
		t file a separate Schedul	e J.			
2. Do you l	have dependents?	X No				
	st Debtor 1 and	H	this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2			this information for dent			X No
	tate the dependents'					Yes
names.						<b>X</b> No
						Yes
						X No
						Yes
						Yes
						X No
						Yes
3. Do your	expenses include	X No				
	es of people other than and your dependents?	Yes				
Part 2:	Estimate Your Ongoing Mo	onthly Expenses				
			ess you are using this form	as a supplement in a Chapter 1	3 case to report	
expenses as of the applicable		ptcy is filed. If this is a	supplemental Schedule J, o	check the box at the top of the fo	orm and fill in	
Include expen	ses paid for with non-ca	=	nce if you know the value			•
of such assist	ance and have included	it on Schedule I: Your I	Income (Official Form 106l.)			Your expenses
	·	xpenses for your reside	ence. Include first mortgage	payments and	4	\$1,246.00
_	for the ground or lot.				4.	φ1,240.00
	eal estate taxes				4a.	\$0.00
	operty, homeowner's, or r	renter's insurance			4b.	\$0.00
	ome maintenance, repair,				4c.	\$125.00
4d. Ho	omeowner's association o	r condominium dues			4d.	\$0.00

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Document Armstrong Vivian Sharone Debtor 1 Case Number (if known) \_

btor		Case Number (if known)		
	First Name Middle Name Last Name		Your expens	es
	Additional Madraga payments for your residence, such as home squity loops	5.	· · ·	\$0.0
5.	Additional Mortgage payments for your residence, such as home equity loans	J.		Ψ0.0
i.	Utilities: 6a. Electricity, heat, natural gas	6a.		\$400.0
	6b. Water, sewer, garbage collection	6b.		\$75.0
	6c. Telephone, cell phone, internet, satellite, and cable service	6c.		\$305.0
	6d. Other. Specify:	6d.	\$	0.0
	Food and housekeeping supplies	7.		\$600.0
	Childcare and children's education costs	8.		\$0.
	Clothing, laundry, and dry cleaning	9.		\$125.
<b>)</b> .	Personal care products and services	10.		\$75.
1.	Medical and dental expenses	11.		\$150.
2.	Transportation. Include gas, maintenance, bus or train fare.	12.		\$260.
	Do not include car payments.			
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.		\$100.
4.	Charitable contributions and religious donations	14.		\$100.
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.		\$60.
	15b. Health insurance	15b.		\$122.
	15c. Vehicle insurance	15c.		\$100.
	15d. Other insurance. Specify:	15d.		\$0.
3.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.		\$0.
<b>.</b>	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.		\$0.
	17b. Car payments for Vehicle 2	17b.		\$0.
	17c. Other. Specify:	17c.		\$0.
	17d. Other. Specify:	17d.		\$0.
3.	Your payments of alimony, maintenance, and support that you did not report as deducted			
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		\$0.
9.	Other payments you make to support others who do not live with you.			
	Specify:	19.		\$0.
).	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	ome.		
	20a. Mortgages on other property	20a.		\$ 0.
	20b. Real estate taxes	20b.	\$	0.
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.
	20e. Homeowner's association or condominium dues	20e.	\$	0.

Official Form 106J Record # 708092 Schedule J: Your Expenses Page 2 of 3 Case 16-14536 Doc 1 Filed 04/28/16 Entered 04/28/16 17:12:39 Desc Main Document Page 36 of 62

Debtor	1 VIVIA	iii Silaiolle	Armstrong	Case Number (if known)	
	First Na	ame Middle Name	Last Name		
21.	Other. S	Specify:Postage/Bank Fees (\$5.00),		21	. \$5.00
22	Your mo	onthly expense: Add lines 4 through 21.		22	\$3,848.00
	The resu	ult is your monthly expenses.			
23.	Calculat	te your monthly net income.			
	23a.	Copy line 12 (your comibined monthly in	ncome) from Schedule I.	238	\$5,811.17
	23b.	Copy your monthly expenses from line	22 above.	238	\$3,848.00
	23c.	Subtract your monthly expenses from y	our monthly income.	230	\$1,963.17
		The result is your monthly net income.			
24.	Do you	expect an increase or decrease in your e	xpenses within the year after you f	ile this form?	
	For exar	mple, do you expect to finish paying for you	r car loan within the year or do you	expect your	
	mortgag	e payment to increase or decrease because	e of a modification to the terms of ye	our mortgage?	
	X No				
	Yes	s. Explain Here:			

 Official Form 106J
 Record #
 708092
 Schedule J: Your Expenses
 Page 3 of 3

#### Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT a	n attorney to help you fill out bankruptcy forms?
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read to	he summary and schedules filed with this declaration and that they are true and
✗ _/s/ Vivian Sharone Armstrong	<b>x</b>
Signature of Debtor 1	Signature of Debtor 2
Date 04/21/2016 MM / DD / YYYY	DateMM / DD / YYYY

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Fill in this in	formation to ider	ntify your case:	
Debtor 1	<u>Vivian</u>	Sharone Middle Name	Armstrong  Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	or the : <u>NORTHERN</u> District of <u>II</u>	LLINOIS(State)
Case Number (If known)	Γ		-

#### Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

information. If more space is needed, attach a separa number (if known). Answer every question.		ne top of any additional page		e
Part 1: Give Details About Your Marital Status ar	nd Where You Lived Before			
01. What is your current marital status?				
Married				
Not married				
02 During the last 3 years, have you lived anywher	re other than where you live	now?		
No.				
Yes. List all of the places you lived in the last	3 years. Do not include whe	re you live now.		
Debtor 1	Dates Debtor lived there	Debtor 2:		Dates Debtor 2 lived there
03 Within the last 8 years, did you ever live with a sproperty states and territories include Arizona, and Wisconsin.)  ■ No.  □ Yes. Make sure you fill out Schedule H: Your of the sure of Your Income  04 Did you have any income from employment or a fill in the total amount of income you received from If you are filling a joint case and you have income  ■ No.  □ Yes. Fill in the details	California, Idaho, Louisian  Codebtors (Official Form 10)  from operating a business on all jobs and all businesses	a, Nevada, New Mexico, Puer 6H). during this year or the two p s, including part-time activities	rto Rico, Texas, Washington revious calendar years?	
	Sources of income Check all that apply	Gross income (before deductions and exclusions)	Sources of income Check all that apply	Gross income (before deductions and exclusions)

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Vivian Sharone Armstrong Case Number (if known) Debtor 1 First Name Middle Name Last Name 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) \$6,609/month From January 1 of current year until Pension the date you filed for bankruptcy: \$79,308 For last calendar year: Pension (January 1 to December 31, 2015) Pension \$79,000 For last calendar year: (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 06 Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments

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Debtor	·1 <u>V</u>	/ivian	Sharone	Armstrong		Case Number (if known)		
	F	First Name	Middle Name	Last Name				
 	Insider corporagent,	ations of which you are a including one for a busing schild support and alimo	any general partners an officer, director, peness you operate as a	; relatives of any general erson in control, or owner	partners; partnership of 20% or more of the	e who was an insider? is of which you are a gene eir voting securities; and a ments for domestic suppo	iny managing	
	☐ Ye	s. List all payments to ar	n insider.					
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
á	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	■ No							
	∐ Ye	s. List all payments to ar	insider.					
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
Pa	rt 4:	Identify Legal actions,	Repossessions, and I	Foreclosures				
1	List all modific	cations, and contract disp	personal injury cases			inistrative proceeding? is, paternity actions, suppo	ort or custody	
	⊔ те	s. Fill in the details.		Natura of the same	0		04-4	
	Check	1 year before you filed for all that apply and fill in the control of the control	· ·	Nature of the case  ny of your property repos		r agency arnished, attached, seized	Status of the case d, or levied?	
	=		a a lour					
	⊔ те	s. Fill in the information b	Delow.					
		ı 90 days before you file use to make a payment b			g a bank or financial	institution, set off any an	nounts from your accounts	
	No	o. Go to line 11						
	☐ Ye	s. Fill in the information b	pelow.					
l	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No.  Yes.							
L								
Pa	rt 5:	List Certain Gifts and C	Contributions					
13	Within	2 years before you filed	d for bankruptcy, dic	d you give any gifts with	a total value of more	e than \$600 per person?		
	■ No	o. es. Fill in the details for ea	ach gift.					
14	ㅡ Within	2 years before you filed	d for bankruptcy, dic	d you give any gifts or c	ontributions with a to	otal value of more than \$6	600 to any charity?	
	No							
	=	s. Fill in the details for ea	ach gift.					
Pa	rt 6:	List Certain Losses						
	Within gambl	= =	for bankruptcy or si	nce you filed for bankru	ıptcy, did you lose aı	nything because of theft,	fire, other disaster, or	
	■ No □ Ye	o. es. Fill in the details for ea	ach gift.					
Pa	ırt 7:	List Certain Payments	or Transfers					

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Case Number (if known)

Armstrong

First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. Payment/Value: \$4,000.00: \$1,500.00 55 E. Monroe Street #3400 paid prior to filing, balance to be paid Chicago,IL 60603 through the plan. Party Contact Info Description and value of any property transferred Date payment Amount of payment or transfer June 2015 -Geraci Law LLC Payment/Value: October 2015 \$4,000.00: \$1,500.00 paid prior to filing, balance to be paid through the plan. **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services 2016 \$25.00 Hananwill Credit Counseling 115 N. Cross St. Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details for each gift.

Vivian

Debtor 1

Sharone

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Debtor 1		Sharone	Armstrong	Case	Number (if known)	<del></del>
	First Name	Middle Name	Last Name			
Par	List Certain Financial	Accounts, Instrume	nts, Safe Deposit Boxes, and St	orage Units		
s Ir	old, moved, or transferred? nclude checking, savings, m	oney market, or ot	ere any financial accounts or her financial accounts; certific ons, and other financial institu	cates of deposit; shares in	_	
	No. Yes. Fill in the details.					
		La	st 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
c	ash, or other valuables?	have within 1 year	before you filed for bankrupt	cy, any safe deposit box c	or other depository for	securities,
	No. Yes. Fill in the details.					
		Wh	no else had access to it?	Describe the conte	nts	Do you still have it?
Į	ave you stored property in a  No.  Yes. Fill in the details.		ace other than your home wit	hin 1 year before you filed  Describe the conte		Do you still
						have it?
fo			Someone Else  one else owns? Include any pr	operty you borrowed fron	n, are storing for, or ho	old in trust
		Wh	nere is the property?	Describe the prope	erty	Value
	Debtor's estranged husban	d <u>De</u> l	btor's residence	2002 Lexus SC 4	30	\$7,000
Part	Give Details About En	vironmental Informa	ation			1
For th	e purpose of Part 10, the fol	llowing definitions	apply:			
ha	zardous or toxic substance	s, wastes, or mate	ocal statute or regulation con rial into the air, land, soil, surf cleanup of these substances,	ace water, groundwater, o		
	te means any location, facili or used to own, operate, or u		defined under any environmer disposal sites.	ntal law, whether you now	own, operate, or utiliz	e
	azardous material means an obstance, hazardous materia	-	nental law defines as a hazard minant, or similar term.	lous waste, hazardous su	bstance, toxic	
Repo	rt all notices, releases, and p	proceedings that y	ou know about, regardless of	when they occurred.		
24 <b>H</b>	as any governmental unit no	otified you that you	u may be liable or potentially l	iable under or in violation	of an environmental I	aw?

No.

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			Document	Page 43 of 62
Debtor 1	Vivian	Sharone	Armstrong	Case Number (if known)

Last Name

25	Have you notified any governmental unit of	any release of hazardous material?		
	No.			
	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
26	Have you been a party in any judicial or adn	ninistrative proceeding under any environ	nmental law? Include settlements and ord	lers.
	No.			
	Yes. Fill in the details.			
		Court or agency	Nature of the case	Status of the case
Pa	Give Details About Your Business or C	connections to Any Business		
27	Within 4 years before you filed for bankrupt	cy, did you own a business or have any o	of the following connections to any busin	ess?
	A sole proprietor or self-employed in	a trade, profession, or other activity, eitl	ner full-time or part-time	
	A member of a limited liability compa	ny (LLC) or limited liability partnership (	LLP)	
	A partner in a partnership			
	An officer, director, or managing exe	•		
	An owner of at least 5% of the voting	or equity securities of a corporation		
	No. None of the above applies. Go to Par	t 12.		
	Yes. Check all that apply above and fill in	the details below for each business.		
28	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to a	anyone about your business? Include all	financial
	No.			
	Yes. Fill in the details.			
		Date issued		
Pa	rt 12: Sign Below			
i	have read the answers on this Statement of answers are true and correct. I understand the n connection with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519, and 3571.	at making a false statement, concealing	property, or obtaining money or property	
	✗ /s/ Vivian Sharone Armstrong	×		
	Signature of Debtor 1	Signature of De	btor 2	
	Date 04/21/2016 MM / DD / YYYY	DateMM / D	2 / 2000/	
	IVIIVI / DD / TTTT	IVIIVI 7 D	7 1111	
	Did you attach additional pages to <i>Your State</i>	ment of Financial Affairs for Individuals	Filing for Bankruptcv (Official Form 107)	?
			<b>3</b> • • • • • • • • • • • • • • • • • • •	
	■ No			
	Yes			
[	Did you pay or agree to pay someone who is	not an attorney to help you fill out bankru	uptcy forms?	
	No			
	Yes. Name of person			
			Declaration, and Signature (	Official Form 119).

First Name

Middle Name

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

Case No:	
Chapter:	Chapter 13
N OF ATTORNEY FOR DEE	BTOR
at I am the attorney for the above cankruptcy, or agreed to be paid in connection with the bankrupt	d to me, for services
0	
0	
= 0	
any other person unless they ar	re members and associates
· ·	
ce for all aspects of the bankru	ptcy
o the debtor in determining who	ether to file a petition in
airs and plan which may be requ	uired;
mation hearing, and any adjour	ned hearings thereof;
ide the following service:	
de the following service.	
ION	
ny agreement or arrangement for	or
oceedings.	
<del>-</del>	
1ttorney	
L.L.C.	
	Chapter:  N OF ATTORNEY FOR DEI  at I am the attorney for the above bankruptcy, or agreed to be paid in connection with the bankrup  out any other person unless they are ther person or persons who are fice for all aspects of the bankrup  of the debtor in determining whe the airs and plan which may be requested the following service:  ION

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Name of law firm

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### UNITED STATES BANKRUFTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00

3. Before signing this agreement, the attorney	has received	,s 1,500	
toward the flat fee, leaving a balance due of \$	2,500	_; and \$ 310	for expenses
leaving a balance due for the filing fee of \$	0		



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Attorney for the Debtor(s)

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 4,14,16

Signed:

Debtor(s)

Co-Debtor(s)

Do not sign this agreement if the amounts are blank.

Case 16-14536 Doc 1 Fileo (Parasi) Law Entered 04/28/16 17:12:39 Desc Main National Headquarters: 55 E. Monroe நான் அழு (Chica மே திற மி. 666-925-1313 help@geracilaw.com

Date: 4/14/2016

Consultation Attorney: ADD

Record #: 708-092

**Attorney - Client Agreement** 

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will subfill any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.
No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not
stopped by the Automatic Stay of a filed bankrutpcy is my responsibility.  Injury or other claims or property   must disclose any such claims or propery   now have or acquire after filing Chapter13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.
PLAN: The plan payment is estimated to be \$
My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other:
My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other
Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have
been told about this and I will deal with my student loans myself directly  Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts;  support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge.
Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some of all of the funds into my Chapter 13 plan.
I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened.
X Wivian Armstrong (Debtor) X (Joint Debtor) Dated: 4-14-2016
Attoriey for the Debtor(s) Representing Geraci Law L.L.C.

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Vivian Sharone Armstrong / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 04/21/2016 /s/ Vivian Sharone Armstrong

**Vivian Sharone Armstrong** 

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

### Document Page 53 of 62 In re Vivian Sharone Armstrong / Debtor

#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Vivian

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deny your found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 04/21/2016	/s/ Vivian Sharone Armstrong	
	Vivian Sharone Armstrong	_
Dated: 04/26/2016	/s/ Jon Kurt Clasing	
	Attorney: Jon Kurt Clasing	_

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Debto	r 1 Vivian	Sharone A	rmstrong	Case Number (if known)	·			
	First Name	Middle Name La	st Name					
Par	6: Answer These Questio	ns for Reporting Purposes						
		and the property of the proper						
16.	What kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
	you have?		as incurred by an individual primarily for a personal, family, or nousehold purpose.					
			LNo. Go to line 16b.  Yes. Go to line 17.					
		16h Are vour dehts prin	16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain					
			money for a business or investment or through the operation of the business or investment.					
		No. Go to line 16d	No. Go to line 16c.					
		Yes. Go to line 17	Yes. Go to line 17.					
		16c. State the type of debts	16c. State the type of debts you owe that are not consumer debts or business debts.					
				****				
17.	Are you filing under							
	Chapter 7?	No. I am not filing un	der Chapter 7. Go to line 18.					
	Do you estimate that after	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	any exempt property is	_						
	excluded and administrative expenses	∐No. 						
	are paid that funds will be	Yes.	Yes.					
	available for distribution to unsecured creditors?							
			<b>—</b>					
18.	How many creditors do you estimate that you	<b>■</b> 1-49 <b>□</b> 50-99	☐ 1,000-5,000 ☐ 5,001-10,000	☐ 25,001-50,0 ☐ 50,001-100				
	owe?	100-199	10,001-25,000	☐ More than 1				
		200-999						
19.	How much do you	\$0-\$50,000	□ \$1,000,001-\$10 mi	illion	01-\$1 billion			
	estimate your assets to	\$50,001-\$100,000	\$10,000,001-\$50 n		),001-\$10 billion			
	be worth?	\$100,001-\$500,000	\$50,000,001-\$100		0,001-\$50 billion			
		\$500,001-\$1 million	\$100,000,001-\$500					
20.	How much do you estimate your liabilities	□ \$0-\$50;000 □ \$50,001-\$100,000	□ \$1,000,001-\$10 mi					
	to be?	\$100,001-\$500,000	□ \$10,000,001-\$50 n □ \$50,000,001-\$100	· _	0,001-\$10 billion 10,001-\$50 billion			
		□ \$500,001-\$1 million	\$100,000,001-\$50					
Par	7: Sign Below							
	· · · · · · · · · · · · · · · · · · ·	I have everying dithip notition		irm, that the information may jided in two				
For	<b>you</b>	correct.	i, and i declare under penalty or perj	jury that the information provided is true	e and			
		If I have chosen to file under	,12, or 13					
		of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
				omeone who is not an attorney to help	me fill out			
			e with the charter of title 11. United	States Code, specified in this petition.				
		•	·					
		<del>-</del>	result in fines up to \$250,000, or imp	obtaining money or property by fraud in orisonment for up to 20 years, or both.	connection			
			4 7					
		Signature of Debtor 1	O Granstrong	Signature of Debtor 2				
		orginature of Debtof 1		Cignature of Debtor 2				
		Executed on _: 4	<u>12/1</u> 2016	Executed on				
		MM .	/ DD / YYYY	MM / DD	/ YYYY			

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Debtor 1 Vivian Sharone Armstrong  First Name Middle Name Last Name  Debtor 2  (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the :NORTHERNDistrict ofILLINOIS(State)							
First Name Middle Name Last Name  Debtor 2  (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the :NORTHERN District ofILLINOIS	FIII IN THIS IN	Fill in this information to identify your case:					
Debtor 2  (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the :NORTHERN District ofILLINOIS	Debtor 1	Vivian	Sharone	Armstrong			
(Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State)  Case Number		First Name	Middle Name	Last Name			
United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State)  Case Number	Debtor 2						
Case Number(State)	(Spouse, if filing)	First Name	Middle Name	Last Name			
	United States Bankruptcy Court for the : <u>NORTHERN</u> _ District of _ <u>ILLINOIS</u>						
Well .	Case Number Check if thi						
	THE STATE OF THE S						

#### Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fi	ill out bankruptev forms?
■ No	
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary and schedu	ules filed with this declaration and that they are true and
* Vining Jamo trong *	
Signature of Debtor 1 Signatu	re of Debtor 2
Date : 4 / 2 / /2016 Date	MM / DD / YYYY

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Debtor 1	Vivian	Sharone	Armstrong	Case Number (if known)	
	First Name	Middle Name	Last Name		
	hin 2 years before you fi itutions, creditors, or ot		you give a financial statement to a	nyone about your business? Include all financial	
	No.				
	Yes. Fill in the details.				
		Date is	sued		
Part 12	Sign Below				
answ in co 18 U.	ers are true and correct	I understand that make toy case can result in fand 3571.		otor 2	
Did y	ou attach additional pag	jes to Your Statement o	of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?	
<b>™</b> N	lo 'es				
Did y	ου pay or agree to pay s	someone who is not an	attorney to help you fill out bankru	ptcy forms?	
<b>III</b> N	lo				
Y	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 1	19).

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#### DISCLAIMER DEBET have Perd and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax,
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filling spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filling spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACQUIRATE!!!!

Vivian Sharone Armstrong

X Date & Sign

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Vivian Sharone Armstrong / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 4/2/12016

Vivian Sharone Armstrong

X Date & Sign

Record # 708092

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		•					
6. Calc	culate the median family income that applies to you. Follow thes	steps:					
16a	. Fill in the state in which you live.	IL					
16b.	. Fill in the number of people in your household.	1					
16c.	Fill in the median family income for your state and size of househed.  To find a list of applicable median income amounts, go online using instructions for this form. This list may also be available at the bar	ng the link specified in the s		13. <b>\$49,741.00</b>			
7. <b>Hov</b>	w do the lines compare?						
17a.	ine 15b is less than or equal to line 16c. On the top of page 1 § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disp			ed under 11 U.S.C			
17b.	ine 15b is more than line 16c. On the top of page 1 of this for § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposa your current monthly income from line 14 above.						
Part 3	Gaiculate Your Commitment Period Under 11 U.S.C. §1325(b)	(4)					
8. <b>Cop</b>	y your total average monthly income from line 11			\$6,608.72			
th	duct the marital adjustment if it applies. If you are married, your set calculating the commitment period under 11 U.S.C. § 1325(b)(4) come, copy the amount from line 13d.		•				
	the marital adjustment does not apply, fill in 0 on line 19a.			\$0.00			
Sı	ubtract line 19a from line 18.			\$6,608.72			
:0. <b>Cal</b>	culate your current monthly income for the year. Follow these ste	:ps:					
20	a. Copy line 19b			\$6,608.72			
	Multiply by 12 (the number of months in a year).			x 12			
20	bb. The result is your current monthly income for the year for this pa	irt of the form.		\$79,304.64			
20	oc. Copy the median family income for your state and size of house	old from line 16c		\$49,741.00			
1. <b>How</b>	v do the lines compare?						
_	ne 20b is less than line 20c. Unless otherwise ordered by the court years. Go to Part 4.	on the top of page 1 of the	is form, check box 3, The commitme	ent period is			
_	ne 20b is more than or equal to line 20c. Unless otherwise ordered neck box 4, <i>The commitment period is 5 years</i> . Go to Part 4.	by the court, on the top of	page 1 of this form,				
		,					
Part 4	Sign Below						
	By signing here 1 declare under penalty of perjury that the information of the significant of the sideal of the significant of the significant of the significant of	ation on this statement an	d in any attachments is true and con	rect.			
	Date: 4 /2) /2016						
	If you checked line 17a, do NOT fill out or file Form 122C-2.						
	If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.						

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Debtor 1	Vivian	Sharone	Armstrong	Case Number (if known)
	First Name	Middle Name	Last Name	
Part 5:	Sign Below			
	Une	eclare under penalty of perjury that  What  an Sharone Armstrong	t the information on the	is statement and in any attachments is true and correct.
	Date: Dated:	<u> </u>	O	

Form B 201A, Notice to Consumer Debtor(s)

In re Vivian Sharone Armstrong / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee. \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 12/12016

Vivian Sharone Armstrong

X Date & Sign

Attorney: Jon Kurt Class

Record # 708092

Form B 201A, Notice to Consumer Debtor(s)

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